

June 17, 2016

ATC Group Services Attn: Mr. Robert Smith 46555 Humboldt, Suite 100 Novi, MI 48377

Project: School Drinking Water Testing

Dear Mr. Robert Smith,

Enclosed is a copy of the laboratory report for the following work order(s) received by TriMatrix Laboratories:

Work Order	Received	Description
1606101	06/03/2016	Willis Wonderland Daycare

This report relates only to the sample(s) as received. Test results are in compliance with the requirements of the National Environmental Laboratory Accreditation Program (NELAP) and/or one of the following certification programs:

ANAB DoD-ELAP/ISO17025 (#ADE-1542); Arkansas DEP (#88-0730/13-049-0); Florida DEP (#E87622-24); Georgia EPD (#E87622-24); Illinois DEP (#200026/003329); Kentucky DEP (AL123065/#0021); Michigan DPH (#0034); Minnesota DPH (#491715); New York ELAP (#11776/53116); North Carolina DNRE (#659); Virginia DCLS (#460153/7952); Wisconsin DNR (#999472650); USDA Soil Import Permit (#P330-14-00305).

Any qualification or narration of results, including sample acceptance requirements and test exceptions to the above referenced programs, is presented in the Statement of Data Qualifications and Project Technical Narrative sections of this report. Estimates of analytical uncertainties and certification documents for the test results contained within this report are available upon request.

If you have any questions or require further information, please do not hesitate to contact me.

Sincerely,

Gary L. Wood Project Chemist



PROJECT TECHNICAL NARRATIVE(s)

No Project Narrative is associated with this report.

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STATEMENT OF DATA QUALIFICATIONS

All analyses have been validated and comply with our Quality Control Program. No Qualification is required.



ANALYTICAL REPORT

Client: **ATC Group Services** Work Order: 1606101

Project: School Drinking Water Testing Description: Willis Wonderland Daycare

Client Sample ID: 1-P-F Kitchen Upstairs Sampled: 06/01/16 06:20 Lab Sample ID: 1606101-01 Sampled By: David Reinhold Matrix: **Drinking Water** Received: 06/03/16 16:05

Metals in Drinking Water by EPA 200 Series Methods

Analyte	Analytical Result	RL	Action Limit	Unit	Dilution Factor	Method	Date Time Analyzed	Ву	QC Batch
Lead	<0.0010	0.0010	0.015	mg/L	1	USEPA-200.8 Rev. 5.4	06/15/16 15:40	MSB	1606138

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ANALYTICAL REPORT

Client: **ATC Group Services** Work Order: 1606101

Project: School Drinking Water Testing Description: Willis Wonderland Daycare

06/01/16 06:23 Client Sample ID: 2-P-F Bathroom Sampled: Lab Sample ID: 1606101-03 Sampled By: David Reinhold Received: 06/03/16 16:05 Matrix: **Drinking Water**

Metals in Drinking Water by EPA 200 Series Methods

Analyte	Analytical Result	RL	Action Limit	Unit	Dilution Factor	Method	Date Time Analyzed	Ву	QC Batch
Lead	<0.0010	0.0010	0.015	mg/L	1	USEPA-200.8 Rev. 5.4	06/15/16 15:41	MSB	1606138

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ANALYTICAL REPORT

Client: **ATC Group Services** Work Order: 1606101

School Drinking Water Testing Project: Description: Willis Wonderland Daycare

06/01/16 06:26 Client Sample ID: 3-P-F Utility Sink Sampled: Lab Sample ID: 1606101-05 Sampled By: David Reinhold Matrix: **Drinking Water** Received: 06/03/16 16:05

Metals in Drinking Water by EPA 200 Series Methods

Analyte	Analytical Result	RL	Action Limit	Unit	Dilution Factor	Method	Date Time Analyzed	Ву	QC Batch
Lead	0.0071	0.0010	0.015	mg/L	1	USEPA-200.8 Rev. 5.4	06/15/16 15:45	MSB	1606138

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QUALITY CONTROL REPORT

Metals in Drinking Water by EPA 200 Series Methods

	Sample	Spike			Spike	Control		RPD	
QC Type	Conc.	Qty.	Result	Unit	% Rec.	Limits	RPD	Limits	RL

Analyte: Lead/USEPA-200.8 Rev. 5.4

QC Batch: 1606138 (Metals Direct Analysis)					Analyzed: 06/15/2016	By: MSB
Method Blank		<0.0010	mg/L			0.0010
Laboratory Control Sample	0.0400	0.0403	mg/L	101	85-115	0.0010



PRETREATMENT SUMMARY PAGE

Client: ATC Group Services

Project: School Drinking Water Testing

				Date & Time	
Pretreatment	Lab Sample ID	Batch	Ву	Prepared	
USEPA 600/R-94/173	1606101-01	1606138	PNS	06/14/16 13:46	
	1606101-03	1606138	PNS	06/14/16 13:46	
	1606101-05	1606138	PNS	06/14/16 13:46	

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Lab Use	
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Date Time I/	3. Relinquished By 3. Received For Lab By	1600 3.	6/3/10 Date	Es a	2. Resident B	1 Inne		L.Resylves By		Company
)			63	Sample					ature	Sampleys Signature
cinits, analyze flush	Detection	is above	(hour	Lead (Comments 15		Carrier	How Shipped? Hand	(CINO)	Sampled By (print)
									10	
									8	
									0	
									7	
			X	7	6:27	<		F-F Utility sink	06 . 3-	B
			*		6:26			P-F UTILL Sink	05 53-1	0
			K		6:24			F. F. Bathoon	0+ 12-1	02
			X		6:23			P-F Bathpoon	03 32-1	0
			×		12.9		75	- F Kitchen upston	02 = 1-6-6	D
			×	XDE	6; 20	6-1-16	B.	P-F Kitcher upstra	01 1/-1	10
Total Sample Comments		Number of Containers Submitted		a Matrix	Time w	ID Sample Date	Cooler ID	Field Sample ID	Number	Schedule Code
H Other (note below	Container Type (corresponds to Container Packing List)	pe (corresponds	Container Ty						-	-
			Lead	comments)	☑ Client □ Other (comments)	Invoice To Contact/Report To	147 c	I 48377		Jim McFadden Work Order No.
					0.1PO.No.	188 BC 1628 4	0	3 Nembold Driv		Receipt Lag No. 32
A NONE pH-7 B) HNO ₃ pH<2			inory ush	Child	onderland	Will's Land-Fland	j.		y Client Name	VOA Rack/Tray
Pg of		Analyses Requested	A	.com	d Rapids, MI 49512 www.trimatrixlabs.com	Grand Rapi	hange Court SE, Gra Fax (616) 942-7463	5560 Corporate Exchange Court SE, Grand Rapids, MI 49512 Phone (616) 975-4500 Fax (616) 942-7463 www.trimatrixlabs.c	Phor	For Lab Use Only
151019155	COC No. 1	cord	dy Re	Custo	Chain of Custody Record	Cha		₹Z Z	RIMAT	*

ORIGINAL - LABORATORY

COPY - SAMPLER

SAMPLE RECEIVING / LOG-IN CHECKLIST

A TOLASTOL	Client OTO	Work C	Order# 10010101			
TRIMATRI	E s Receipt Record Page/Line # 10	New / Add To Project Chemist Sample	3#5			
• • • • • • • • • • • • • • • • • • • •	1 2-3	32 Project Crieffills Sample				
Recorded by (initials/date)	Cooler Qty Receiv		eter (#54) See Additional Gooler			
WC 6.3.16	D D Box 2	Thermometer Used Digital Thermome	Information Form			
		Cooler# Time	Cooler # . Time			
m 2365 1655	m3573 Time 700	Cooler #				
Custody Seels:	Custody Seals:	Custody Seals:	Custody Seals:			
None	□ None	☐ None	☐ None			
Present / Intact	☐ Present / Intact	☐ Present / Intact	Present / Intact			
Present / Not Intact	Present / Not Intact	Present / Not Intact	Present / Not intact Coolant Type:			
Coolant Type:	Coolant Type:	Coolant Type:	Loose Ice			
☐ Bagged Ice	☐ Bagged Ice	☐ Bagged Ice	☐ Bagged Ice			
☐ Blue Ice	☐ Blue Ice	Blue Ice	☐ Blue Ice			
None	□ None	□ None	None			
Coolant Location:	Coolant Location:	Coolant Location:	Coolant Location: Dispersed / Top / Middle / Bottom			
Dispersed / Top / Middle / Bottom	Dispersed / Top / Middle / Bottom	Dispersed / Top / Middle / Bottom Temp Blank Present: ☐ Yes ☐ No	Temp Blank Present: ☐ Yes ☐ No			
Temp Blank Present: Yes No If Present, Temperature Blank Location is:	Temp Blank Present: ☐ Yes ☐ No If Present, Temperature Blank Location is:	If Present, Temperature Blank Location is:	If Present, Temperature Blank Location is:			
Representative Not Representative	Representative Not Representative		Representative Not Representative			
Observed Correction	Observed Correction	Observed Correction Actual *C	Observed Correction Actual *C			
*C Factor *C Actual *C	*C Factor *C Actual *C	*C Factor *C Actual C	*C Factor *C //teldat 5			
Temp Blank:	Temp Blank:	Temp Black	Temp Blank			
Sample 1: 23.8, - 23.8	Semple 1 222 222	Sample 1:	Sample II			
	22.6					
Sample 2: 23.8 - 23.8	Sample 2 22.0 - 22.0	Sample 2:	Sample 2			
Sample 3: 239 - 239	Sample 3: 22.2 - 22.2	Sample 3:	Sample 3:			
3 Sample Average °C: 23.8	3 Sample Average °C: 22.2		2.0			
3 Sample Average °C: (العبك) - 0		3 Sample Average *C:	3 Sample Average °C:			
☐ Cooler ID on COC?	☐ Cooler ID on COC?	Cooler ID on COC?	☐ Cooler ID on COC? ☐ VOC Trip Blank received?			
□ VOC Trip Blank received?	O VOC Trip Blank received?	VOC Trip Blank received?				
If any shaded a	reas checked, complete Sample	Receiving Non-Conformance and/o	r Inventory Form			
Paperwork Received	TOTAL PROPERTY OF	Check Sample Preservation	THE STATE OF THE S			
Yes No		N/A Yes No				
Chain of Custody record(s)?		/ Avecom _	nk OR average sample temperature, 26° C?			
Received for Lab Signed/Da	ite/Time?	/ Mittal	was thermal preservation required?			
Shipping document?			eted Non Con Cooler - Cont Inventory Form?			
COC Information			le Preservation Verification Form?			
☐ TriMatrix COC ☐ Other			ally preserved correctly?			
COC ID Numbers		If "No", added ora				
		☐ ☐ Received pre-pre	served VOC soils?			
-TO THE DIVERSION		☐ MeOH	□ Na ₂ SO ₄			
Check COC for Accuracy		Check for Short Hold-Time Prep/A	nalyses			
Yes No.		☐ Bacteriological				
Analysis Requested?		☐ Air Bags	AFTER HOURS ONLY: COMES OF COC TO LAB AREA(S)			
Sample ID matches COC?	TANKS MARKET	☐ EnCores / Methanol Pre-Preserved	NONE RECEIVED			
Sample Date and Time mate		Formaldehyde/Aldehyde	RECEIVED, COCs TO LÁB(S)			
Container type completed or		☐ Green-tagged containers ☐ Yellow/White-tagged 1 L ambers (SV F				
All container types indicated	are received?	Notes	Table most			
Sample Condition Summary		10.00				
N/A Yes No Broken container	s/lids?	The state of the s				
Broken container Missing or incom						
D Jilegible information						
D Low volume rece			lank not listed on COC			
/ O / Inappropriate or r	non-TriMatrix containers received?	Cooler Received (Date/Time) Paperwork	Delivered (Date/Time) s1 Hour Goal Met?			
	containers have headspace?	10.3-16 1005 10.3	110 1720 Yes (No)			
Extra sample loca	ations / containers not listed on COC?	1000 1000 1000	IU IIU			

TRIMATRIX

SAMPLE PRESERVATION VERIFICATION FORM

1510	1915	5	Adjusted by: Date:	SIGN	DO NOT AD	JUST pH FOR T	HESE CON	TAINER TYPE
Container Type	5/23	4	13		6	15		
Tag Color	Lt. Blue	Blue	Brown	ELHIDI	Red	Red Stripe		
Preservative	NaOH	H ₂ SO ₄	H ₂ SO ₄		HNO ₃	HNO ₃		
Expected pH	>12	<2	<2		<2/	<2		
COC Line #1	500	APP.	4377	W T	1/	17. 30	Carried P	
COC Line #2		all a	135		1/			
COC Line #3	of Light	Sta EL		John.	1		PART III	Acres.
COC Line #4					1/			
COC Line #5	Devel 3		16.3. 2		1/	1/2 1/2		
COC Line #6	Strate of							
COC Line #7				7-17	IN THE S			
COC Line #8		Ti					-	
COC Line #9			THE PARTY					
COC Line #10	TO THE OWNER OF	100				100		

pH Strip Reagent #

Aqueous Samples: For each sample and container type, check the box if pH is acceptable. If pH is not acceptable for any sample container, record pH in box, and note on Sample Receiving Checklist and on Sample Receiving Non-Conformance Form. If approved by Project Chemist, add acid or base to the sample to achieve the correct pH. Add up to, but do not exceed 2x the volume initially added at container prep (see table below for initial volumes used). Add orange pH tag to sample container and record information requested. Record adjusted pH on this form. Do not adjust pH for container types 6 and 15.

COC ID#			Adjusted by:_ Date:		DO NOT AL	JUST pH FOR THE	SE CONTAINER TYPES
Container Type	5/23	4	13	T	6	15	A CONTRACTOR
Tag Color	Lt. Blue	Blue	Brown		Red	Red Stripe	
Preservative	NaOH	H ₂ SO ₄	H ₂ SO ₄		HNO ₃	HNO ₃	
Expected pH	>12	<2	<2	Allen = 10	<2	<2	The state of the s
COC Line #1							7.2
COC Line #2		A FIS	PIL	18/402	4 1/58/87		
COC Line #3	Live			A STORY			
COC Line #4	Mall.	OF LUE	HVII.GET T				
COC Line #5	THE	end 1					
COC Line #6				100			
COC Line #7	W. Carrie						STATE OF THE
COC Line #8					A SAME TO	No.	E H Television
COC Line #9		14		207		Maria Control	
COC Line #10	14						

Container Size (mL)	Original Vol. of Preservative (mL)
Container Type 5	NaOH
500	2.5
1000	5.0
Container Type 4	H ₂ SO ₄
125	0.5
250	1.0
500	2.0
1000	• 4.0
Container Type 13	H ₂ SO ₄
500	2.5